PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

maintenance fee notifica	tions.			<u> </u>		parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
513	7590 03/04	/2009	nav				
WENDEROTH, LIND & PONACK, L.L.P. 1030 15th Street, N.W., Suite 400 East Washington, DC 20005-1503				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPIO (571) 273-2885, on the date indicated below.			
Washington, DC	20005-1503					(Depositor's name)	
		•				(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/685,539 10/16/2003		Takuji Maeda	2003_1475A 5980		5980		
ITILE OF INVENTION	: FILE-UPDATE APPA	ARATUS					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	E DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/04/2009	
EXAMINER ART U		ART UNIT	CLASS-SUBCLASS				
YAARY, MICHAEL D 2193			717-168000				
 I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternation (2) the name of a single registered attorney or a second or the content of th	the patent front page, list up to 3 registered patent attorneys natively. Single firm (having as a member a or agent) and the names of up to attorneys or agents. If no name is ll be printed.			
	less an assignee is ident h in 37 CFR 3.11. Comp GNEE		THE PATENT (print or ty) data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY OSAKA, JAPAI	atent. If an assigned assignment. ' and STATE OR CC		document has been filed for	
Please check the appropr	iate assignce category or	categories (will not be pr	rinted on the patent): \Box	Individual 🚨 Cor	poration or other private gr	roup entity Government	
4a. The following fee(s) Sissue Fee Publication Fee (N	so small entity discount p		A check is enclosed. Payment by credit car The Director is hereby	nt of Fee(s): (Please first reapply any previously paid issue fee shown above) neck is enclosed, ment by credit card. Form PTO-2038—is attached. Director is hereby authorized to charge the required fee(s), any deficiency, or credit any payment, to Deposit Account Number			
	tus (from status indicated s SMALL ENTITY state		b. Applicant is no lon	ger claiming SMALL	LENTITY status. See 37 C	Cl ² R 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req- records of the United Sta /Kenneth W. Fiel	ites Patent and Trademark	d from anyone other than t Office.	he applicant; a regist	ered attorney or agent; or t	the assignee or other party in	
Authorized Signature 2009.04.01 11:20:54 -04'00'				Date Apri	il 1, 2009		
Typed or printed nam	Kannath W				52,430		
in application. Confiden	ation is required by 37 C	FR 1.311. The informatic U.S.C. 122 and 37 CFR	on is required to obtain or i	etain a benefit by the	public which is to file (an	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.